

<b>Name of Lead Agency</b>	<b>The Center for Children and Families (The Center)</b>
<b>Location</b>	<b>Billings, MT</b>
<b>Title of Project</b>	<b>Family Housing Matters (FHM)- A Partnering for Progress Initiative of the Center for Children and Families</b>
<b>Program Option</b>	Five-Year plus 2-Year Extension
<b>Geographic Area and Congressional District Served</b>	City of Billings 1 <sup>st</sup> Congressional District; Rural
<b>Brief Program Description</b>	<p>In 2007, The Center applied for, and was awarded, one of the 53 original Regional Partnership Grants (RPG), which allowed for implementation of a supervised/ supported housing program (Second Chance Homes - SCH) for substance abusing parents and their children. Between March 2008 &amp; March 2012, SCH provided long-term transitional housing and a continuum of in-home support services to sixty-four (64) families (68 adults &amp; 124 children). The community has seen tremendous successes for families served, growth in collaborative partnerships, and the addition of a number of family centered services not previously available in the community. The Center proposed to build on the knowledge gained and lessons learned during the original five year RPG by implementing program enhancements that moved the initial project collaboration to a more wide-spread system model. This included 1) the addition of a licensed addiction counselor (LAC) directly at Child Protective Services (CPS) (providing more intensive collaboration of CPS/AOD services), 2) a targeted effort to combine and re-purpose state level fiscal resources to sustain supported housing, 3) a more targeted partnership with Housing Authority to ensure independent housing availability. Additionally, based on lessons learned in the initial RPC, The Center proposed a data-driven modification to transitional housing services, providing earlier placement and shorter lengths of stay in transitional housing, and greater emphasis on community-based, in-home supports/safety planning. And finally the project proposed increased resources dedicated to evaluation activities.</p> <p>The primary objective of the extension is to sustain the Second Chance Homes (SCH) transitional and community-based housing services as part of a continuum of family centered and trauma informed services (Family Housing Matters - FHM). Services proposed in the extension intend to increase the well-being, improve permanency, and enhance the safety of children who are in out-of-home care or are at imminent risk for being placed in out-of-home care as a result of a parent or caretaker's substance</p>

	abuse. The project also sought to maintain and expand successful interagency collaboration and promote sustainable systems change through intensified integration of Alcohol or other Drug (AOD) and Child Welfare (CPS) services at both the local and state level through local team meetings and state level inter-agency dialogue.
<b>Target Population</b>	Family Housing Matters/SCH targets families identified by CPS who are at imminent risk of having children placed in out-of-home care (present danger is identified), or who have a child in out of home care as a result of parent/caregiver substance abuse.
<b>Participants Served</b>	Children: 164 Adults: 88 Families: 86
<b>Major Goals</b>	<p><b>Major program goals included:</b></p> <ol style="list-style-type: none"> <li>1. To continue enhancement of community treatment services through transitional housing and community based opportunities for parents and children.</li> <li>2. To promote children's safety by reducing substance abuse and subsequent child abuse and neglect among SCH residents/graduates</li> <li>3. Establish permanency for children in the child welfare system; avoiding removal of children whenever possible and reunifying children with parents more rapidly than in families outside the proposed living programs.</li> <li>4. To address family social, relational, educational and economic needs by assessing for and then addressing needs through strength based planning and programming that will aid them in leading a substance free life</li> <li>5. Strengthen the capacity of families to promote structure guidance and nurturance for their children.</li> <li>6. Increase participating families' overall mental, physical, and dental health status/well being</li> <li>7. Develop and evaluate an operational model for short-term transitional housing environments to be replaced in this and other regions.</li> </ol>
<b>Key Major Program Services</b>	<p><b>Case Management and In-Home Services</b></p> <ul style="list-style-type: none"> <li>• Intensive/Coordinated Case Management</li> <li>• Family Group Decision Making/Family Case Conferencing</li> </ul> <p><b>Parenting/Family Strengthening</b></p> <ul style="list-style-type: none"> <li>• Standard and Enhanced Parenting Skills Training/Education</li> <li>• Evidence-Based Parenting or Family Strengthening Program – Celebrating Families, Incredible Families</li> </ul>

**Visitation Services**

- Supervised Visitation
- Supportive Supervised Visitation
- Therapeutic Visitation/Therapeutic Supervised Visitation

**Mental Health and Trauma Services for Adults**

- Mental Health Services and Psychiatric Care Including Medication Management
- Trauma-Informed Services
- Trauma-Specific Services – Seeking Safety, Untangling Relationships

**Specialized Outreach, Engagement and Retention**

- Cognitive Behavioral Strategies – Contingency Management, Motivational Interviewing/Motivational Enhancement Therapy

**Family-Centered Substance Abuse Treatment**

- Comprehensive Integrated Family Treatment Plan

**Screening and Assessment – Child Welfare and Other Children’s Issues**

- Screening and Assessment for Child Welfare Issues
- Screening and Assessment for Trauma
- Other Specialized Child Screening and Assessment – Neuropsychological evaluations, Developmental, Behavioral/Socio-Emotional, Mental Health/Psychological, Medical/Dental

**Screening and Assessment – Substance Use and Other Adult Issues**

- Screening and Assessment for Substance Use Disorders
- Other Specialized Adult Screening and Assessment – Parenting, Mental Health/Co-Occurring Disorders, Trauma and Neuropsychological Evaluations

**Children’s Services**

- Early Intervention
- Developmental Services
- Remedial/Academic Supports
- Mental Health Counseling

**Housing Services**

- Housing Support and Assistance Services
- Transitional, Interim or Temporary Short-Term Housing
- Linkages to Permanent Supportive Housing

**Cross-Systems Collaboration**

- Clinical and Program Training
- Cross-systems Policies and Procedures

	<ul style="list-style-type: none"> <li>• Regular Joint Case Staffing Meetings</li> <li>• Cross-systems Information Sharing and Data Analysis</li> <li>• Partner Meetings – Regional Partnership and Program Management</li> </ul> <p><b>Other</b></p> <ul style="list-style-type: none"> <li>• Linkages to Substance Abuse Treatment for Adults including Intensive Outpatient, Non-Intensive Outpatient or Other Step-Down, and Aftercare/Continuing Care/Recovery Community Support Services</li> <li>• Linkages to Trauma Services for Children/Youth including Neurodevelopmental Model, Parent Child Interaction Therapy, Cognitive Behavioral Therapy, and Child Parent Psychotherapy</li> </ul>
<p><b>Partner Agencies and Organizations</b></p>	<p><b>Child Welfare</b></p> <ul style="list-style-type: none"> <li>• Montana Child and Family Services Division</li> </ul> <p><b>Substance Abuse</b></p> <ul style="list-style-type: none"> <li>• Second Chance Homes</li> </ul> <p><b>Courts</b></p> <ul style="list-style-type: none"> <li>• Yellowstone County Family Drug Treatment Court (YCFDTC)</li> <li>• State of Montana Thirteenth Judicial District</li> </ul> <p><b>Tribal</b></p> <p><b>Criminal Justice, Law Enforcement, Legal and Related Organizations</b></p> <ul style="list-style-type: none"> <li>• South Central Region IV Probation and Parole (P&amp;B)</li> <li>• Department of Corrections</li> </ul> <p><b>Other Community and Child and Family Services</b></p> <ul style="list-style-type: none"> <li>• Family Support Network</li> <li>• Best Beginnings Council of Yellowstone County</li> </ul> <p><b>Housing</b></p> <ul style="list-style-type: none"> <li>• Housing Authority of Billings</li> </ul> <p><b>Mental Health</b></p> <ul style="list-style-type: none"> <li>• South Central Montana Mental Health Center</li> </ul> <p><b>Health Services</b></p> <ul style="list-style-type: none"> <li>• Department of Public Health</li> </ul> <p><b>Education</b></p> <p><b>Employment</b></p> <p><b>Other Evaluation and Training</b></p>

	<b>Other</b>
<b>Evaluation Design and Comparison Group Type</b>	<p>Quasi-experimental</p> <p>Same-time, Usual CW/SA Services</p>
<b>Performance Indicators</b>	<p><b>Permanency</b></p> <p>Analysis included 91 families and 164 children who participated in family drug court, full family sober housing, or both family drug court and full family sober housing programs.</p> <p>Analysis revealed more successful parent-child reunification rates for families who participated in full family sober housing as compared to family drug court (30% of family drug court children and 46% of full family sober housing children were reunified with their parents), <math>\chi^2(1, N = 161) = 4.72, p &lt; .05</math>.</p> <p>Analysis revealed that children of full family sober housing families achieved permanency faster (<math>M_{days} = 568.50, SD = 274.45</math>) than children whose parents had participated in family drug court and full family sober housing concurrently (<math>M_{days} = 731.91, SD = 267.54</math>), <math>p &lt; .01</math>. <math>F(2, 161) = 3.40, p &lt; .05</math>. These group outcome differences existed above successful treatment program completion.</p> <p><b>Well-Being</b></p> <p>In an outcome evaluation of parents' and children's psychological and emotional well-being, parents self-reported on their own symptoms and their children's symptoms on several psychological measures. Instruments used included the Center for Epidemiologic Studies Depression Scale, Parenting Stress Index-Short Form, Protective Factors Survey, Adult-Adolescent Parenting Inventory-2, Child Behavior Checklist, and Adaptive Behavior Assessment System-II.</p> <p>In an evaluation of scores at program intake in comparison to scores at program exit, paired samples t-test revealed that parents reported significantly higher levels of social support, more appropriate expectations of children, and higher levels of empathy for children, increased valuing of children's power independence, and decreased belief in corporal punishment.</p> <p>Parents reported that their children displayed significantly lower levels of adjustment problems and higher levels adaptive functioning at program exit as compared to program intake. Teachers of children reported that children displayed marginally significant decreases in attention problems, and significant increases in global adaptive functioning, increased practical skills, 35 increased communication, and increased recreation and leisure activities at program exit as compared to program intake. Effect sizes ranged</p>

	from .28 to 1.09, with a majority of effects considered to be medium to large (Cohen, 1992) indicating substantial improvements in parents' and children's psychological well-being outcomes.
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